10	626	800
Applicat	ion or Docl	ket Number

PATENT APPLICATION FEE DETERMINATION RECORD  Effective January 1, 2003														
									15608					
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALI	LEN		OR	OTHER SMALL				
TOTAL CLAIMS			23				RAT	Έ	FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	375.00	OR	BASIC FEE	750.00		
TOTAL CHARGEABLE CLAIMS			23 — mir	us 20=	* 3		X\$ 9	}=	24 10	OR	X\$18≃			
INDEPENDENT CLAIMS			2 _ mi	nus 3 =	6		X42	=	6.2	OR	X84=			
טואר	CTIPLE DEPEN	DENT CLAIM-PF	PRESENT			+140	)=		OR					
* If the difference in column 1 is less than zero, enter "0" in column 2							TOT		402.0		TOTAL			
CLAIMS AS AMENDED - PART II  OTHER 1												THAN		
	(Column 1) (Column 2) (Column 3)							LL E	NTITY	OR	SMALL	. В		
NT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FÉE		
AMENDMENT	Total `	· 23	Minus	-02	3	=	X\$ 9	)=	P	OR	X\$18=	7		
AME	Independent	. 3	Minus	***	5_		X42	=	1	OR	X84=	1		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM.						+140	)=		OR	+280=			
								TAL	$\rightarrow$	OR	TOTAL			
		ADDIT.	FEE L	-	10.1	ADDIT. FEE								
	(Column 1) CLAIMS			(Column 2) (Column 3)  HIGHEST				_	ADDI-			ADDI-		
ENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	RAT	Έ	TIONAL FEE		RATE	TIONAL		
AMENOMENT	Total	*	Minus	**		= :	X\$ 9	)=		OR	X\$18=			
AME	Independent	*	Minus	***	COL 4114	-	X42	=		OR	X84=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+140	)=		OR	+280=				
·							ADDIT.	TAL		OR	TOTAL ADDIT: FEE			
(Column 1) (Column 2) (Column 3)														
AMENDMENTC		CLAIMS REMAINING AFTER AMENDMENT		PREVI	BER	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=	· X\$ 9	)=		OR	X\$18=			
ME	Independent	*	Minus	***		=	X42	_	·	OR	X84=			
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+140	)=		OR	+280=			
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***OF TOTAL ADDIT. FEE													
400		mber Previously P					found in th	a ann	ronriata ho	v in co	olumn 1			